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T-327 P.004/014 F-485

**REQUEST FOR CONTINUED
EXAMINATION (RCE) TRANSMITTAL**

Address to:

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/919,567
Filing Date	July 30, 2001
First Named Inventor	John J. Dooley
Group Art Unit	3627
Examiner Name	Michael A. Cuff
Attorney Docket Number	21790-08920

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-entitled application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. SUBMISSION REQUIRED UNDER 37 C.F.R. § 1.114

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☒ Enclosed
- i. ☒ Amendment/Response
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other _____

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2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(l) required)
- b. ☐ Return Postcard
- c. ☐ Other _____

3. Fees

The RCE fee under 37 C.F.R. § 1.17(c) is required by 37 C.F.R. § 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the required fees, including any additional fees, or credit any overpayments to Deposit Account No. 19-2555
- ☒ Fee Transmittal Enclosed (in duplicate)
- ☐ Check in the amount of \$ enclosed

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Dorian Cartwright	Registration No. (Attorney/Agent)	53,853
Signature		Date	

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to:
Examiner Michael A. Cuff, Group Art Unit 3627, Commissioner for Patents, at the facsimile number indicated below.

Name (Print/Type)	Dorian Cartwright	Registration No. (Attorney/Agent)	53,853
Signature	<i>Dorian Cartwright</i>	Date	6/4/06
Facsimile No.	(571) 273-8300		

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